

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Law for Congress

ADDRESS (number and street)

P.O. Box 12774

Check if different  
than previously  
reported. (ACC)

Jacksonville

NC

28546

2. FEC IDENTIFICATION NUMBER ▼

C

C00573766

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NC

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2015

through

M M / D D / Y Y Y Y  
12 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Laurie Jean Breininger

Signature of Treasurer

Laurie Jean Breininger

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
01 / 04 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 17

Write or Type Committee Name

Law for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	19158.07	105074.32
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	19158.07	105074.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	25967.19	76036.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	25967.19	76036.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	37537.46	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	8500.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 17

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Law for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

5900.00

71802.17

**(ii) Unitemized.....**

11758.07

17197.07

**(iii) TOTAL of contributions from individuals ▶**

17658.07

88999.24

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

1500.00

16075.08

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

19158.07

105074.32

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

8500.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

8500.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

19158.07

113574.32

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 17

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25967.19	76036.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	25967.19	76036.86

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	44346.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19158.07
25. SUBTOTAL (add Line 23 and Line 24).....	63504.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25967.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37537.46

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Law for Congress**

Full Name (Last, First, Middle Initial)

**Pratik Bhakta**

Mailing Address 2006 Viburnum Lane

City

Ashville

State

NC

Zip Code

28803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Hotelier

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 14 2015

Transaction ID : SA11AI.4553

Amount of Each Receipt this Period

500.00

paypal

Full Name (Last, First, Middle Initial)

**Whaja Brunelli**

Mailing Address 200 Valencia Drive

City

Jacksonville

State

NC

Zip Code

28546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self employed

Occupation

property rentals

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 28 2015

Transaction ID : SA11AI.4555

Amount of Each Receipt this Period

1000.00

paypal

Full Name (Last, First, Middle Initial)

**Norman Kellum**

Mailing Address P.O. Box 866

City

New Bern

State

NC

Zip Code

28563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kellum Law Firm

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 30 2015

Transaction ID : SA11AI.4544

Amount of Each Receipt this Period

1000.00

check

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

Leah A Lofton

Mailing Address 151 King George Court

City

Jacksonville

State

NC

Zip Code

28546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tek Systems

Occupation

IT Analyst

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2015

Transaction ID : SA11AI.4546

Amount of Each Receipt this Period

1000.00

check

Full Name (Last, First, Middle Initial)

Leah A Lofton

Mailing Address 151 King George Court

City

Jacksonville

State

NC

Zip Code

28546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tek Systems

Occupation

IT Analyst

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4543

Amount of Each Receipt this Period

1000.00

check

Full Name (Last, First, Middle Initial)

Matthew T Maggio

Mailing Address 167 Crooked Run Drive

City

New Bern

State

NC

Zip Code

28560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Marine Corp

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.4515

Amount of Each Receipt this Period

400.00

In-kind - Provided food &amp; Drink for Fundraiser

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

Matthew T Maggio

A.

Mailing Address 167 Crooked Run Drive

City

New Bern

State

NC

Zip Code

28560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Marine Corp

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : SA11AI.4559

Amount of Each Receipt this Period

300.00

In-kind - Food &amp; Drink for fundraiser

Full Name (Last, First, Middle Initial)

Joseph McLaughlin

B.

Mailing Address 201 Hampshire Place

City

Jacksonville

State

NC

Zip Code

28546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self-employed

Occupation

consulting

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period

200.00

check

Full Name (Last, First, Middle Initial)

Gramie Earl Rountree

C.

Mailing Address 226 Folly Road

City

Sunbury

State

NC

Zip Code

27979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2015

Transaction ID : SA11AI.4524

Amount of Each Receipt this Period

250.00

paypal

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Law for Congress**

Full Name (Last, First, Middle Initial)  
**Trawick H Stubbs Jr.**

Mailing Address **P.O. Box 1654**

City State Zip Code  
**New Bern NC 28563**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Perdue & Buzzy Stubbs Lawn Fir**

Occupation  
**Landscape**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**250.00**

Date of Receipt

**11 / 10 / 2015**

Transaction ID : **SA11Al.4513**

Amount of Each Receipt this Period

**250.00**

check

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**250.00**

**5900.00**



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 17

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	-------------------------------------	---	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Law for Congress**Full Name (Last, First, Middle Initial)  
**A. Philip Joseph Law**

Mailing Address P.O. Box 12774

City	State	Zip Code
Jacksonville	NC	28546

FEC ID number of contributing  
federal political committee.**C** H6NC03138Name of Employer  
Hewlett-PackardOccupation  
Information Technology

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

23575.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Transaction ID : SA11D.4509

Amount of Each Receipt this Period

500.00

In-kind - RV rental

Full Name (Last, First, Middle Initial)  
**B. Philip Joseph Law**

Mailing Address P.O. Box 12774

City	State	Zip Code
Jacksonville	NC	28546

FEC ID number of contributing  
federal political committee.**C** H6NC03138Name of Employer  
Hewlett-PackardOccupation  
Information Technology

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

24075.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2015

Transaction ID : SA11D.4522

Amount of Each Receipt this Period

500.00

In-kind - RV rental

Full Name (Last, First, Middle Initial)  
**C. Philip Joseph Law**

Mailing Address P.O. Box 12774

City	State	Zip Code
Jacksonville	NC	28546

FEC ID number of contributing  
federal political committee.**C** H6NC03138Name of Employer  
Hewlett-PackardOccupation  
Information Technology

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

24575.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : SA11D.4562

Amount of Each Receipt this Period

500.00

In-kind - RV rental

**SUBTOTAL** of Receipts This Page (optional).....

1500.00

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

**A. A&W II LLC**

Mailing Address 200Valencia Drive

City	State	Zip Code
Jacksonville	NC	28546

Purpose of Disbursement  
office rent

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2015

Amount of Each Disbursement this Period

490.00
--------

Transaction ID : SB17.4597

**B. A&W II LLC**

Mailing Address 200Valencia Drive

City	State	Zip Code
Jacksonville	NC	28546

Purpose of Disbursement  
office rent

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2015

Amount of Each Disbursement this Period

490.00
--------

Transaction ID : SB17.4602

**C. A&W II LLC**

Mailing Address 200Valencia Drive

City	State	Zip Code
Jacksonville	NC	28546

Purpose of Disbursement  
office rent

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

Amount of Each Disbursement this Period

490.00
--------

Transaction ID : SB17.4615

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1470.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

**A. A & Z Signs and Engraving**

Mailing Address 1516 Sulphur Spring Road

City	State	Zip Code
Waynesville,	NC	28786

Purpose of Disbursement  
Signs

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2015

Amount of Each Disbursement this Period

3514.95

Transaction ID : SB17.4598

**B. Campaign Partner**

Mailing Address 16 Dudley Street

City	State	Zip Code
Fitchburg	MA	01420

Purpose of Disbursement  
Web hosting

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

Amount of Each Disbursement this Period

59.00

Transaction ID : SB17.4591

**c. Campaign Partner**

Mailing Address 16 Dudley Street

City	State	Zip Code
Fitchburg	MA	01420

Purpose of Disbursement  
web hosting

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2015

Amount of Each Disbursement this Period

59.00

Transaction ID : SB17.4608

**SUBTOTAL** of Disbursements This Page (optional).....

3632.95

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Law for Congress**

Full Name (Last, First, Middle Initial)

**A. Campaign Partner**

Mailing Address 16 Dudley Street

City	State	Zip Code
Fitchburg	MA	01420

Purpose of Disbursement  
Web hosting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

59.00
-------

Transaction ID : SB17.4613

**B. Cedar Point Signs & Graphics Inc.**

Mailing Address 526 Cedar Point Blvd

City	State	Zip Code
Cedar Point	NC	28584

Purpose of Disbursement  
advertising

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2015

Amount of Each Disbursement this Period

2762.79
---------

Transaction ID : SB17.4619

**c. Inner Banks Media Group**

Mailing Address 1884 West Arlington Blvd

City	State	Zip Code
Greenville	NC	27834

Purpose of Disbursement  
Radio advertising

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

Amount of Each Disbursement this Period

2726.00
---------

Transaction ID : SB17.4595

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5547.79

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

**A. Inner Banks Media Group**

Mailing Address 1884 West Arlington Blvd

City	State	Zip Code
Greenville	NC	27834

Purpose of Disbursement  
Radio Advertising

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11	/	11	/	2015

Amount of Each Disbursement this Period

786.00
--------

Transaction ID : SB17.4603

**B. Inner Banks Media Group**

Mailing Address 1884 West Arlington Blvd

City	State	Zip Code
Greenville	NC	27834

Purpose of Disbursement  
Media advertising

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11	/	17	/	2015

Amount of Each Disbursement this Period

600.00
--------

Transaction ID : SB17.4606

**c. Philip Joseph Law**

Mailing Address P.O. Box 12774

City	State	Zip Code
Jacksonville	NC	28546

Purpose of Disbursement  
In-kind - RV rentalCategory/  
Type

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: NC

District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10	/	01	/	2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.4510

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1886.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

**A. Philip Joseph Law**

Mailing Address P.O. Box 12774

City	State	Zip Code
Jacksonville	NC	28546

Purpose of Disbursement  
In-kind - RV rental

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: NC District: 03

Date of Disbursement

M M / D D / Y Y Y Y
11 / 01 / 2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.4523

**B. Philip Joseph Law**

Mailing Address P.O. Box 12774

City	State	Zip Code
Jacksonville	NC	28546

Purpose of Disbursement  
In-kind - RV rental

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: NC District: 03

Date of Disbursement

M M / D D / Y Y Y Y
12 / 01 / 2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.4563

**c. Matthew T Maggio**

Mailing Address 167 Crooked Run Drive

City	State	Zip Code
New Bern	NC	28560

Purpose of Disbursement  
In-kind - Provided food & Drink for Fundraiser

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 30 / 2015

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.4517

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1400.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Law for Congress**

Full Name (Last, First, Middle Initial)

**A. Matthew T Maggio**

Mailing Address 167 Crooked Run Drive

City	State	Zip Code
New Bern	NC	28560

Purpose of Disbursement  
In-kind - Food & Drink for fundraiser

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.4560

**B. SBE Consulting**

Mailing Address 7604 Thompson Mill Road

City	State	Zip Code
Wake Forest	NC	27587

Purpose of Disbursement  
Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2015

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.4599

**c. Time Warner Cable**

Mailing Address 2551 Dulles View Drive

City	State	Zip Code
Hemdon	VA	28546

Purpose of Disbursement  
office phone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

Amount of Each Disbursement this Period

106.06
--------

Transaction ID : SB17.4594

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3406.06

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Law for Congress

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address 2551 Dulles View Drive

City	State	Zip Code
Hemdon	VA	28546

Purpose of Disbursement  
office phone

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2015

Amount of Each Disbursement this Period

53.01
-------

Transaction ID : SB17.4593

**B. Washington Strategic Group**

Mailing Address 524 East 9th Street

City	State	Zip Code
Washington	NC	27889

Purpose of Disbursement  
Billboard advertising

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2015

Amount of Each Disbursement this Period

4400.00
---------

Transaction ID : SB17.4604

**c. Washington Strategic Group**

Mailing Address 524 East 9th Street

City	State	Zip Code
Washington	NC	27889

Purpose of Disbursement  
billboard advertising

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

Amount of Each Disbursement this Period

3700.00
---------

Transaction ID : SB17.4614

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8153.01

25495.81



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 17 OF 17

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4144

Law for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2016

Philip Joseph Law

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O. Box 12774

City

State

ZIP Code

Jacksonville

NC

28546

Original Amount of Loan

8500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 10 / 2015

Date Due

M M / D D / Y Y Y Y  
04/31/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

8500.00

**TOTALS** This Period (last page in this line only)..... ►

8500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.